

AMERICORPS ELIGIBILITY VERIFICATION FORM



Section 1. Member Information and Verification. To be completed and signed by member at the time service begins			
Print Name: Last		First	Middle Initial
Maiden Name:			
Address (Street Name and Number)		Apt. #	Date of Birth (month/day/year)
City	State	Zip Code	Social Security #
I attest, under penalty of perjury, that I am (check one the following): <input type="checkbox"/> A citizen or national of the United States <input type="checkbox"/> A Lawful Permanent Resident (Alien # A _____)			
Member Signature			Date (month/day/year)
Preparer and/or Translator Certification: (To be completed and signed if Section 1 is prepared by a person other than the member.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.			
Preparer's/Translator's Signature		Print Name	
Address (Street Name and Number, City, State, Zip Code)		Date (month/day/year)	
Section 2. Member Review and Verification. To be completed and signed by Program Director or authorized representative. Examine one document from List A OR examine one document from List B <u>and</u> one from List C as listed on the reverse of this form and record the title, number and expiration date, if any, of the document(s).			
List A	OR	List B	AND
List C			
Document title: _____		_____	_____
Issuing authority: _____		_____	_____
Document #: _____		_____	_____
Expiration Date (If any) : ____/____/____		____/____/____	____/____/____
Document #: _____			
Expiration Date (If any) : ____/____/____			
CERTIFICATION - I attest under penalty of perjury, that I have examined the document(s) presented by the above named member, that the above listed document(s) appear to be genuine and relate to the member named, that the member began service on (month/day/year) ____/____/____ and that to the best of my knowledge the member is eligible to serve in an AmeriCorps program in the United States.			
Signature of Program Director or Authorized Rep.		Print Name	Title
Organization Name	Address (Street Name and Number, City, State, Zip Code)		Date (month/day/year)

LISTS OF ACCEPTABLE DOCUMENTS FOR AMERICORPS PARTICIPATION

LIST A

Documents that Establish Both Identity and AmeriCorps Eligibility
1. U.S. Passport (unexpired or expired) 2. Certificate of U.S. Citizenship (INS Form N-560 or N-561) 3. Certificate of Naturalization (INS Form N-550 or N-570) 4. Alien Registration Receipt Card with photo (INS Form I-551 or I-151)

OR

LIST B

Documents that Establish Identity
1. Drivers license or ID card issued by a state or outlying possession of the United States provided it contains a photo or information such as name, date of birth, sex, height, eye color and address. 2. School ID card with photo. 3. Voter's registration card. 4. U.S. Military card

AND

LIST C

Documents that Establish AmeriCorps Eligibility
1. Original or certified copy of a birth certificate issued by a state, county, municipal authority or outlying possession of the United States bearing an official seal. 2. U.S. Citizen ID Card (INS Form I-197) 3. ID Card for use of Resident Citizen in the United States (INS Form I-179)

A member must present a form of identification listed in List A to be eligible to be an AmeriCorps member.

OR

A member must present two pieces of identification, one listed in List B AND one listed in List C in order to be eligible to be an AmeriCorps member.